



## Asthma Rates At An All-Time High In The U.S. Misperceptions Abound About What Defines Asthma Control

(NAPSA)—According to the Centers for Disease Control and Prevention (CDC), asthma is a leading chronic illness affecting an estimated 18.7 million adults and 7 million children. Many people who experience persistent asthma fail to recognize the severity of their disease – often until it is too late and they are fighting to breathe. And while mild asthma can be managed on an “as needed” basis with a quick-relief inhaler, people with persistent asthma should talk to their doctor about daily treatment with a therapy that actually helps prevent symptoms and reduce the number of attacks.

The problem is that many people living with asthma fail to realize that if they are using a quick-relief inhaler to treat their symptoms more than twice a week other than for prevention of exercised-induced bronchospasm (EIB), their asthma is not well controlled. In these cases, a quick-relief inhaler isn't really helping the underlying problem. The National Institutes of Health says that inhaled corticosteroid (ICS) therapies are the first treatment options to consider for long-term control therapy in patients with persistent asthma. ICS therapies are a maintenance versus a quick-relief or “as needed” approach to asthma care. They are intended to be used daily to manage and pre-



**People with persistent asthma should talk to their doctor about the importance of treating inflammation in both large and small airways.**

vent persistent asthma symptoms.

“Many asthma patients don't understand that fast-acting inhalers are not for regular, daily use. They should only be used when experiencing asthma symptoms,” said Dr. Gene Colice, Director of Pulmonary, Critical Care and Respiratory Services at Washington Hospital Center. “More importantly, if a patient is using a fast-acting inhaler more than twice a week, their asthma is not controlled and they should talk to a doctor to discuss better options.”

One example of an ICS therapy that can be used daily to manage persistent asthma is QVAR® (beclomethasone dipropionate HFA). QVAR is important because

of its small particle size. Asthma attacks are caused by inflammation that can affect both the large and small airways of the respiratory system, from the windpipe to the small passage ways of the lung. Because of its small particle size, QVAR is proven to reach both the large and small airways. QVAR helps to prevent inflammation and improve lung function.

If a patient feels their asthma symptoms are not under control, scheduling an appointment with their doctor is the first step in gaining back control. Much like any other condition, compliance with a treatment protocol is key to managing persistent asthma. If a daily maintenance therapy is in order, patients need to remember to comply with their treatment schedule and realize that feeling better does not mean they should stop taking their medication.

“Asthma is a complicated disease because the symptoms aren't always present, so patients sometimes feel like their asthma is cured when it really isn't,” said Dr. Colice. “Maintenance treatments, like ICS therapies need to be taken every day to be effective. Asthma doesn't need to limit anyone from living their life, as long as they take their medications as prescribed and regularly talk with their doctor about asthma control.”

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### Approved Uses and Important Safety Information

QVAR® (beclomethasone dipropionate HFA) Inhalation Aerosol is used in the ongoing treatment of asthma as preventative therapy in patients 5 years of age or older.

QVAR® is also used for asthma patients who require systemic corticosteroid administration, where adding QVAR® may reduce or eliminate the need for systemic corticosteroids.

QVAR® does not replace quick-relief inhalers for sudden symptoms.

**CAUTION: If you are stopping or switching from an oral corticosteroid to QVAR®, follow your doctor's instructions to avoid health risks. (See WARNINGS, Prescribing Information).**

Inhaled corticosteroids may cause a reduction in growth rate, so children taking QVAR® should have their growth checked regularly. The long-term effect on final adult growth is unknown.

Do not stop taking QVAR® abruptly without talking to your doctor.

In clinical studies, common side effects included headache and sore throat. These are not all of the possible side effects of QVAR. For more information, ask your healthcare provider or pharmacist.

You are encouraged to report negative side effects of prescription drugs to the FDA. Visit [www.fda.gov/medwatch](http://www.fda.gov/medwatch), or call 1-800-FDA-1088.

For complete prescribing information, go to [www.QVAR.com](http://www.QVAR.com)